RECOMMENDED DATA FIELDS FOR PCC+ (Customizable Encounter Form application)
DIRECT OUTPATIENT (AS OF 09/15/01)

To ensure that appropriate data is collected, ITSC is recommending to all sites using PCC+ that the following fields should be included on any customized form.

FIELD	LENGTH	CORRESPONDING FIELD(S)
Service Unit Code	2	Location of Encounter, now also include ASUFAC of registering facility
Facility Code	2	Location of Encounter, now also include ASUFAC of registering facility
Date of Service	6 (MMDDYY)	Visit/Admission Date (CCYYMMDD)
Day of Week	1	Day of Week
Patient Identification:		
- HRN	6	ASUFAC_HRN (HRN is the last 6 characters of this value and is the chart number at the ASUFAC (1st 6 characters) , sends chart at LOE if exists, otherwise sends chart at main facility.)
- SSN	9	SSN
- Date of Birth	6 (MM/DD/YY)	
- Sex	1	Sex
- Time of Day	1	Time of Day
- Clinic Code	2	Clinic
- Time of Day	1	Time of Day
Services Rendered by Discipline Code:		
- Primary Provider Discipline/Identifiable	2	Primary Prov Affiliation/Discipline (2nd & 3rd characters)
- Other Provider Discipline/Identifiable	2	Other Prov Affiliation/Discipline (2nd & 3rd characters)
- Other Provider Discipline/Identifiable	2	Other Prov Affiliation/Discipline (2nd & 3rd characters)
- Other Provider Discipline Identifiable	2	Other Prov Affiliation/Discipline (2nd & 3rd characters)
Provider Signature:		
Standard List of Immunizations- (examples)		
- Tetanus Toxin (Value of 1 if given)	1	Either with Immunization Code or Immunization Fields (4 occurrences of each field)
- DP (Value of 2 if given)	1	Either with Immunization Code or Immunization Fields (4 occurrences of each field)
- DPT (Value of 3 if given)	1	Either with Immunization Code or Immunization Fields (4 occurrences of each field)
- Polio (Value of 4 if given)	1	Either with Immunization Code or Immunization Fields (4 occurrences of each field)
- Measles (Value of 5 if given)	1	Either with Immunization Code or Immunization Fields (4 occurrences of each field)
- Influenza (Value of 9 if given)	1	Either with Immunization Code or Immunization Fields (4 occurrences of each field)
- Other (Value of 0 if given)	1	Either with Immunization Code or Immunization Fields (4 occurrences of each field)
Skin Test Result	1	Not on PCC Statistical Record
Maternal Health and Family Planning:		
- Marital Status	1	Not on PCC Statistical Record
- LMP	1	Not on PCC Statistical Record
- Gravida	2	Not on PCC Statistical Record.
- Family Planning Method (PARA)	6	Not on PCC Statistical Record.
IHS Unit No at Parent Facility	6	Not on PCC Statistical Record.
- Cause of Accident	2	Cause of Injury, now receive ICD9 code rather than 2-char code.

Please contact Theresa Cullen, MD, if you have any questions, tcullen@hqt.ihs.gov; 520-670-4803. Additional information: www.ihs.gov/CIO/pccplus

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FIELD	LENGTH	CORRESPONDING FIELD(S)
- Place	2	Place of Injury, now receive 1-char code (A-L) vs. 2-char code
- Alcohol Related	1	Cause of DX1, where value of 2 = Alcohol-related
- Work Related		
- Domestic Violence		
On Site (if done)		
Diagnostic Services Requested: if done on site)		
Lab/Radiology (examples)		
- None (Value of 0)	1	# of Lab Tests Done, where value is 0
- Urinalysis (Value of 1)	1	Not on PCC Statistical Record.
- Hematology (Value of 2)	1	Not on PCC Statistical Record.
- Chemistry (Value of 3)	1	Not on PCC Statistical Record.
- Bacteriology (Value of 4)	1	Not on PCC Statistical Record.
- Serology (Value of 5)	1	Not on PCC Statistical Record.
- Pap (Value of 6)	1	Not on PCC Statistical Record.
- ECG/EKG (Value of 7)	1	Not on PCC Statistical Record.
- Other (Value of 8)	1	Not on PCC Statistical Record.
- X-Ray-Chest (Value of 1)	1	Accomplished with specific code in ICD Procedure code field?
- Other X-Ray (Value of 2)		Accomplished with specific code in ICD Procedure code field?
Follow-up		
- Patient instructions		
- Appointment F/U		
- Referrals		
Primary Provider Identification		
S/O Charting Space		
Problem Purpose of Visit		
- Active Problem		
- Inactive		
- Remove		
- Adding		
- Add/Remove note		
- Other POV		
- Other POV		
- Other POV		
- Other POV		
EDUCATION DONE THIS VISIT		Was an education topic provided on this visit?

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FIELD	LENGTH	CORRESPONDING FIELD(S)
- PATIENT EDUCATION CODE #2		Patient education topic #2
- PATIENT EDUCATION CODE #3		Patient education topic #3
- PATIENT EDUCATION CODE #4		Patient education topic #4
- PATIENT EDUCATION CODE $5		Patient education topic #5
Vital Fields-(examples)		
- Temperature		
- Respiratory rate		
- Weight		
- Vision (corrected)		
- Vision (incorrected)		
- Pulse Oximetry		
- Pain		
- Peak Flow		
LMP		Date LMP on file, NOTE: This may note be current, check against date noted.

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